

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 08/595,957		FILING DATE 2/6/96	
						APPLICANT(S)			
CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.
1							51	1	
2		3		3			52	1	
3		3		3			53		
4		3		3			54		
5		3		3			55		
6							56		
7		2		2			57		
8							58		
9							59		
10		1		1			60		
11		1		1			61		
12							62		
13		3		3			63		
14		3		3			64		
15		3		3			65		
16		3		3			66		
17		3		3			67		
18		3		3			68		
19							69		
20		3		3			70		
21		3		3			71		
22		3		3			72		
23							73		
24		3		3			74		
25		3		3			75		
26							76		
27							77		
28		3		3			78		
29		3		3			79		
30							80		
31		1		1			81		
32		1		1			82		
33		1					83		
34		3		3			84		
35		3		3			85		
36		3		3			86		
37		3		3			87		
38		3		3			88		
39		3		3			89		
40		3		3			90		
41		3		3			91		
42							92		
43							93		
44							94		
45							95		
46							96		
47	1		1				97		
48	1		1				98		
49	1		1				99		
50	1		1				100		
TOTAL IND.							TOTAL IND.	6	
TOTAL DEP.							TOTAL DEP.	82	
TOTAL CLAIMS							TOTAL CLAIMS	88	